Weekly Nutrition Time R Staff Name:		Report _Site: _		Staff		D	Champions
Week of:AM / PM Please log	AM and PM separately	y Turn this shee	t in every Friday w	ith your packet	Enrichment F	II L Program	for Change Arizona Nutrition Network
Brief Description of Activity	Date	Time (to nearest minute increment)	Contact #	MyPlate Ti Sheet & Tip	ρ	Primary Content 1 2	
Squad Games (15 min. max):		morementy		Sheet Tip(s)			
				• • •			
				Sheet Tip(s) Sheet Tip(s)			
				Sheet Tip(s)			
Snack: (15 min. max)				•			
				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
Centers: (30 min. max) Board Game:				Sheet Tip(s)			
Construction:				Sheet Tip(s)			
Creative Play:				Sheet Tip(s)			
Manipulative:				Sheet Tip(s)			
Centers: (30 min. max)				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
Active Games: (45-60 min. max)				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
				Sheet Tip(s)			
Planning Time/Log Time Planning Centers/Clinics for the week							
Time spent filling out log sheets							
Assisting a Nut, Instructor or other staff teaching Nutrition				Who: Who:			
Nutrition Training/Meeting Time							
IF YOU DID A DIFFERENT	ACTIVITY,	PLEASE F	ILL OUT ON	THE BACK C	F THIS	SHEET	
FOR OFFICE LIGHT ON THE			1st Review	2nd Review	Copied for	Payroll	Entered in MR
FOR OFFICE USE ONLY							
I verify that the hours I submitted are a Signature:	ccurate:	Dat	Φ.			то	TAL TIME

_Date:____

Site Mgr.:___

Brief Description of Activity	Date	Time	Contact #s	MyPlate Tip Sheet & Tip #	Prin Con	nary tent
EX.=>Squads: Thunder Dome- Fruit & Veggie Food groups Version. Named fruits & veggies in the fruit & vegetable food groups that pertain to the category	8/5	0.25	15	Sheet: 1 Tip: 5	Н	C,E

ANECDOTAL INFORMATION: (e.g. "We switched to 1% milk!", "I can't wait to try this recipe at home!")					

Primary Content Key:

Topic	Topic	Topic
A: Fat Free & Low Fat Milk	F: Lean Meat & Beans	K: Sodium & Potassium
or Equivalent		
B: Fats and Oils	G: Limit Added Sugars	L: Whole Grains
	or Caloric Sweeteners	
C: Fiber Rich Foods	H: MyPlate – Healthy	M: Food Safety /
	Eating Plan	Hand washing
D: Food Shopping / Prep	I: Physical Activity	
E: Fruits & Vegetables	J: Promote Healthy Weight	

^{*} Topics taught at separate times should each be counted separately. However, if any two topics from MyPlate are taught together (fruits & veggies, whole grains, milk, meats & beans), they should be counted as MyPlate not as individual topics. **For example**, if Fruits & Veggies are taught in one session and Whole Grains are taught in a separate session then these would be counted separately. If they were both taught together in the same session then it would be counted as MyPlate.